

Dates	Where & Who	References
	At <u>London Springs</u> : William & Ellen Nish Davidson, Mary Timperlogos Davidson, James Bailey Davis, Robert Broadhead	HBUM pp 8-10
1877	At <u>Lake Creek</u> : Robert & Sarah A. Lindsay At Lindsay Dell: William & Mary	Lindsay Lindsay 1048-1050
1883	Others came: Bengt Peterson, James Nash, Wm Murdoch Sr., Wm Baird Sr., John W Crook	
	At <u>Lower Settlement</u> (or Stringtown or Benjamin Mark Smith's Grove) 541 Sidney Hyrum Epperson, Jesse Hughes McCord, David Wood, Coldest Jeremiah Robey	
	At <u>Mound City</u> or <u>Upper Settlement</u> =	te?

SURGEON'S FINAL REPORT AND BILL TO:
HECLA MINING COMPANY
STAR ROUTE, BOX 18A — HEBER CITY, UTAH

Statement of Dr.

Name of Employer

Name on Injured Age Date of Injury 19.....

Code: O - Office. V - House Visit. H - Hospital Visit. N - Night Visit. X - X-Rays. S - Operation.

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31
JAN.																															
FEB.																															
MAR.																															
APR.																															
MAY																															
JUNE																															
JULY																															
AUG.																															
SEPT.																															
OCT.																															
NOV.																															
DEC.																															

CODE NO.	NO.	First Treatment @ \$.....	\$	NATURE OF INJURY
.....	Office Dressings @ \$.....	\$	Diagnosis
.....	House Visits @ \$.....	\$
.....	Hospital Visits @ \$.....	\$
.....	Night Visits @ \$.....	\$	Describe Treatment
.....	Operations @ \$.....	\$
.....	X-Rays (Attach Readings) @ \$.....	\$
.....	Sutures @ \$.....	\$
.....	Total Expense for Medical Aid	\$	

Were X-Rays taken by some other Doctor? Was a prescription given?
Date Patient was able to resume work , 19.....
Patient pronounced as cured on , 19.....
Is Patient capable of doing same work as before injury? If not, why?
Any permanent injury? Describe fully

Dated this day of , 19.....

Telephone No. Address

The doctor should sign this form and mail it to Hecla Mining Company
on the day of his last treatment of the injured employee.